

18



TRIAL PRODUCT TRADE NAME
TRIAL PRODUCT GENERIC NAME
TRIAL PRODUCT FORM & STRENGTH
TRIAL PRODUCT QUANTITY

CARD SERIAL NUMBER
CARD EXPIRATION DATE

Figure 2A

18



Physician
Approval Code
☐☐☐☐

Pharmacist
Approval Code
☐☐☐☐

Physician Signature
Pharmacist Signature
Patient Signature

Figure 2B

Figure 3A

AUTHORIZER ID NUMBER

AUTHORIZER NAME
CARD EXPIRATION DATE

20



Figure 3B

Authorizer Signature

20



005240" 0928560

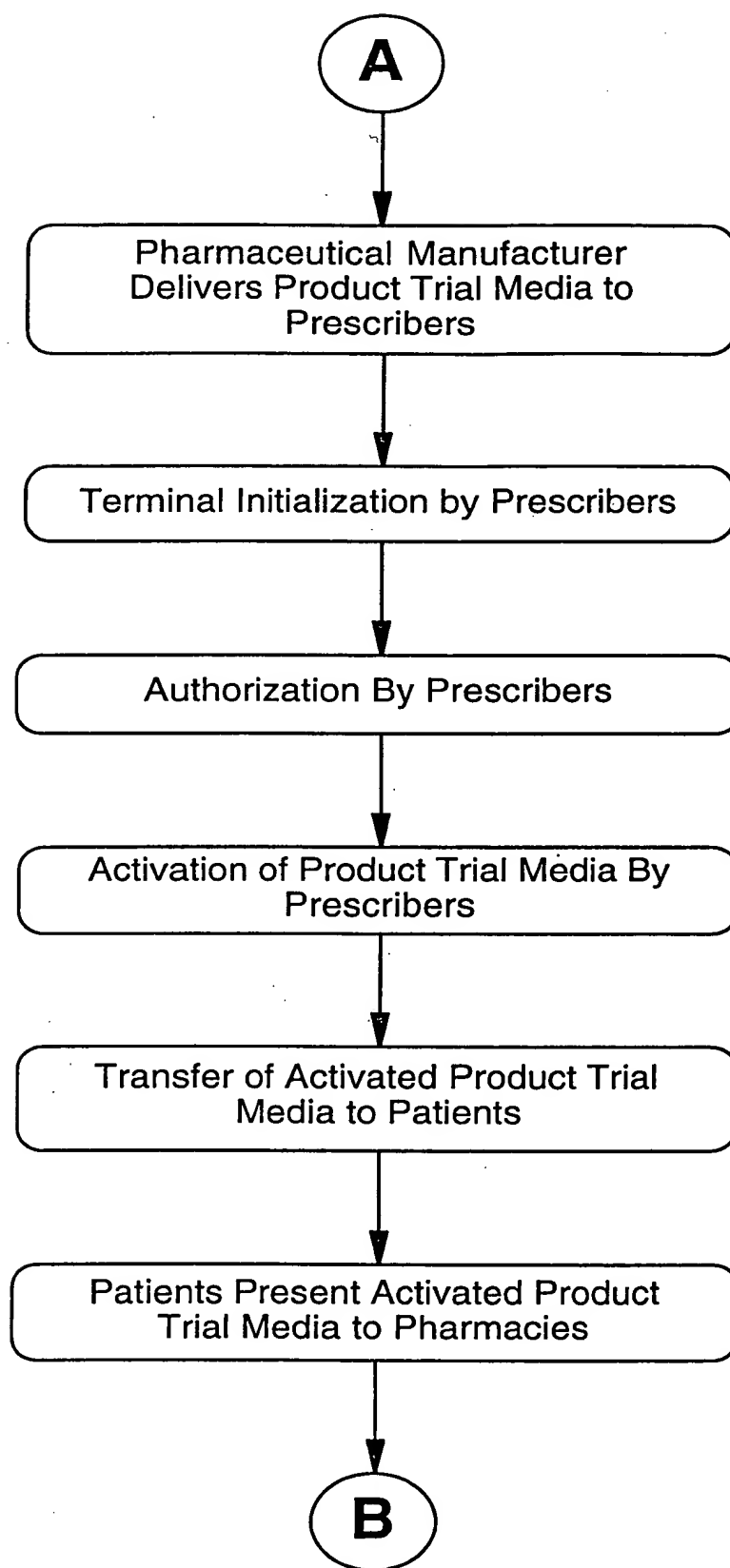


Figure 4A

005240"09285560

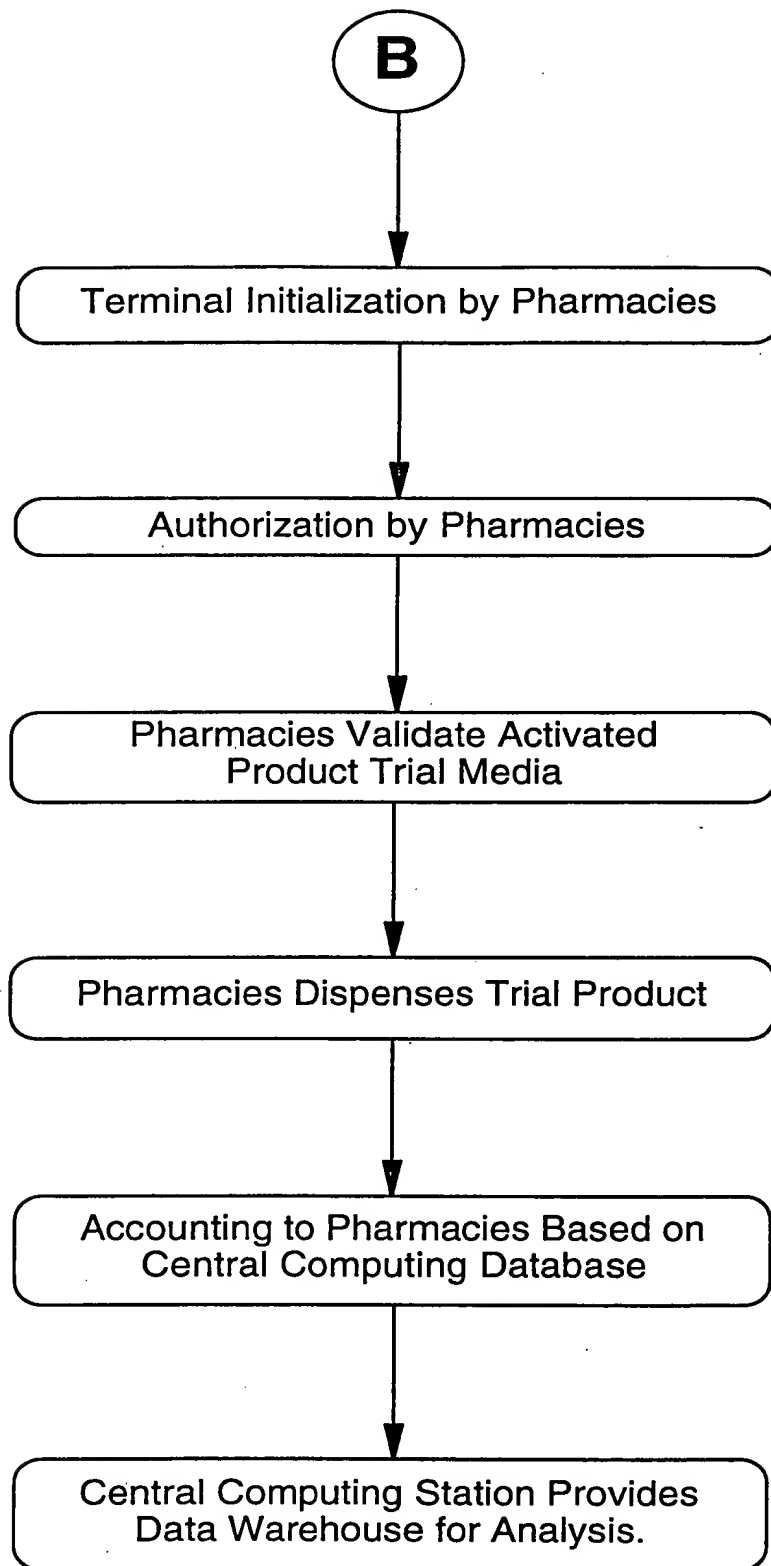


Figure 4B

00558260-04500

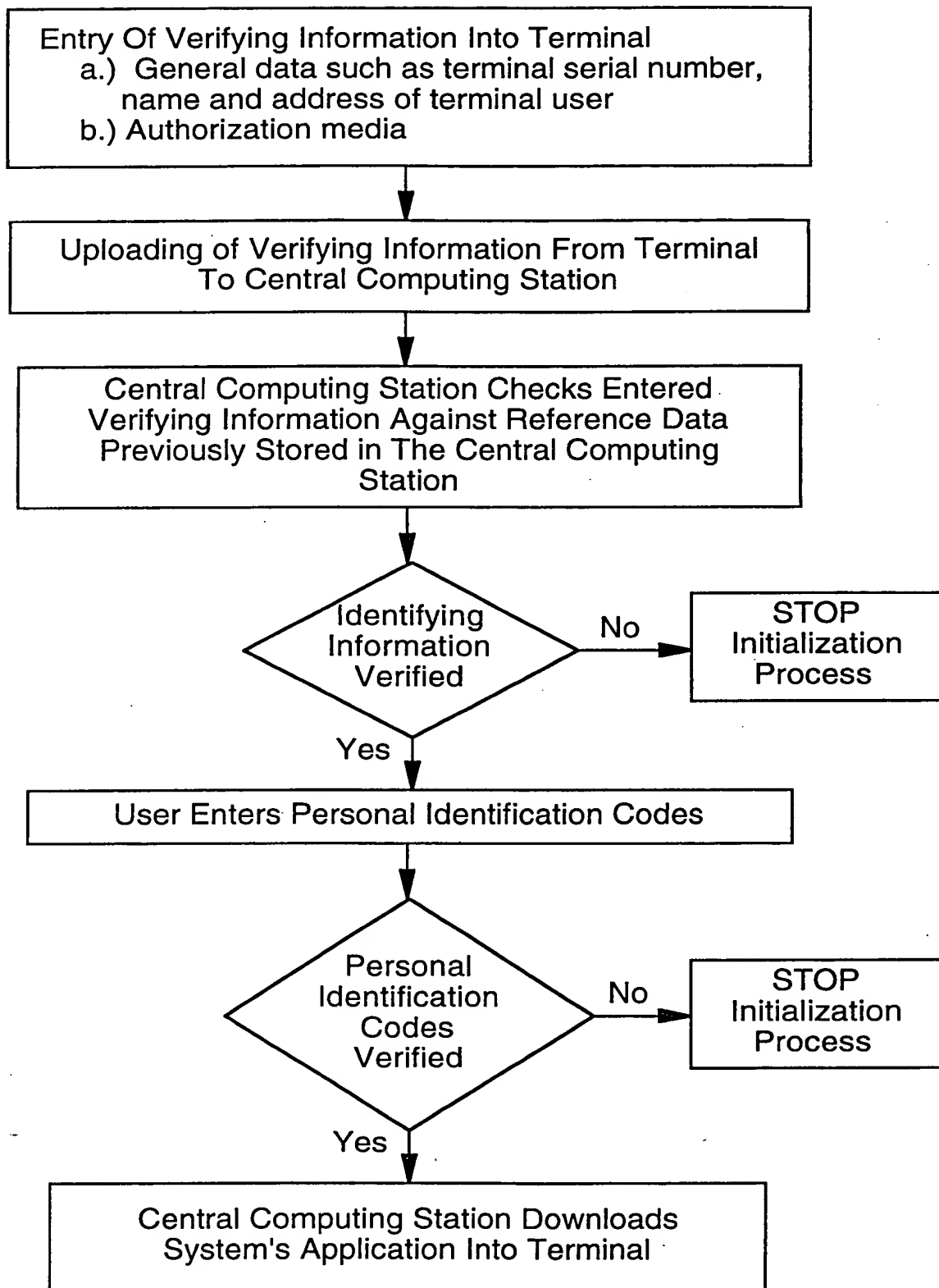
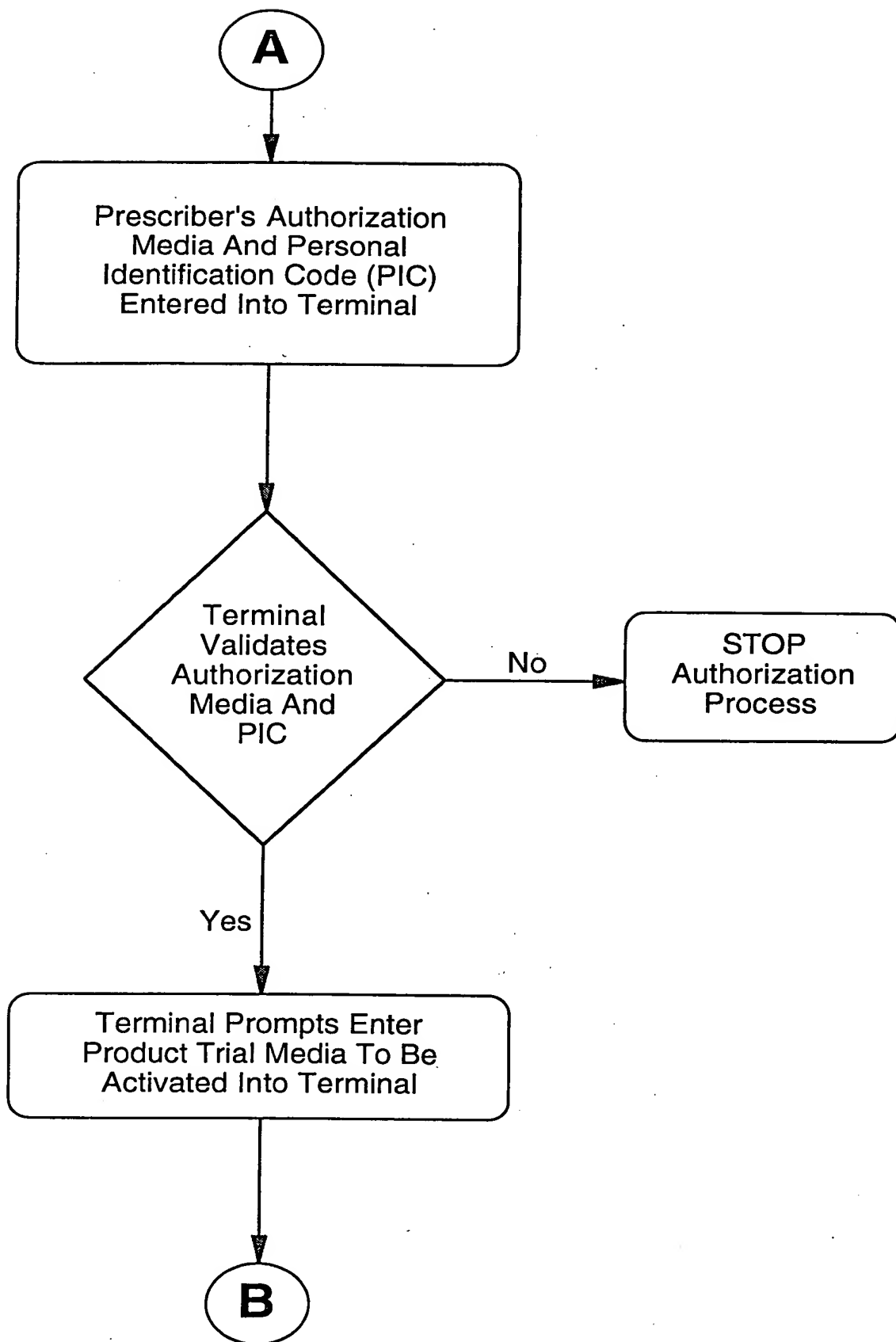


Figure 5

005260 042500



Figur 6A

005240" 09285560

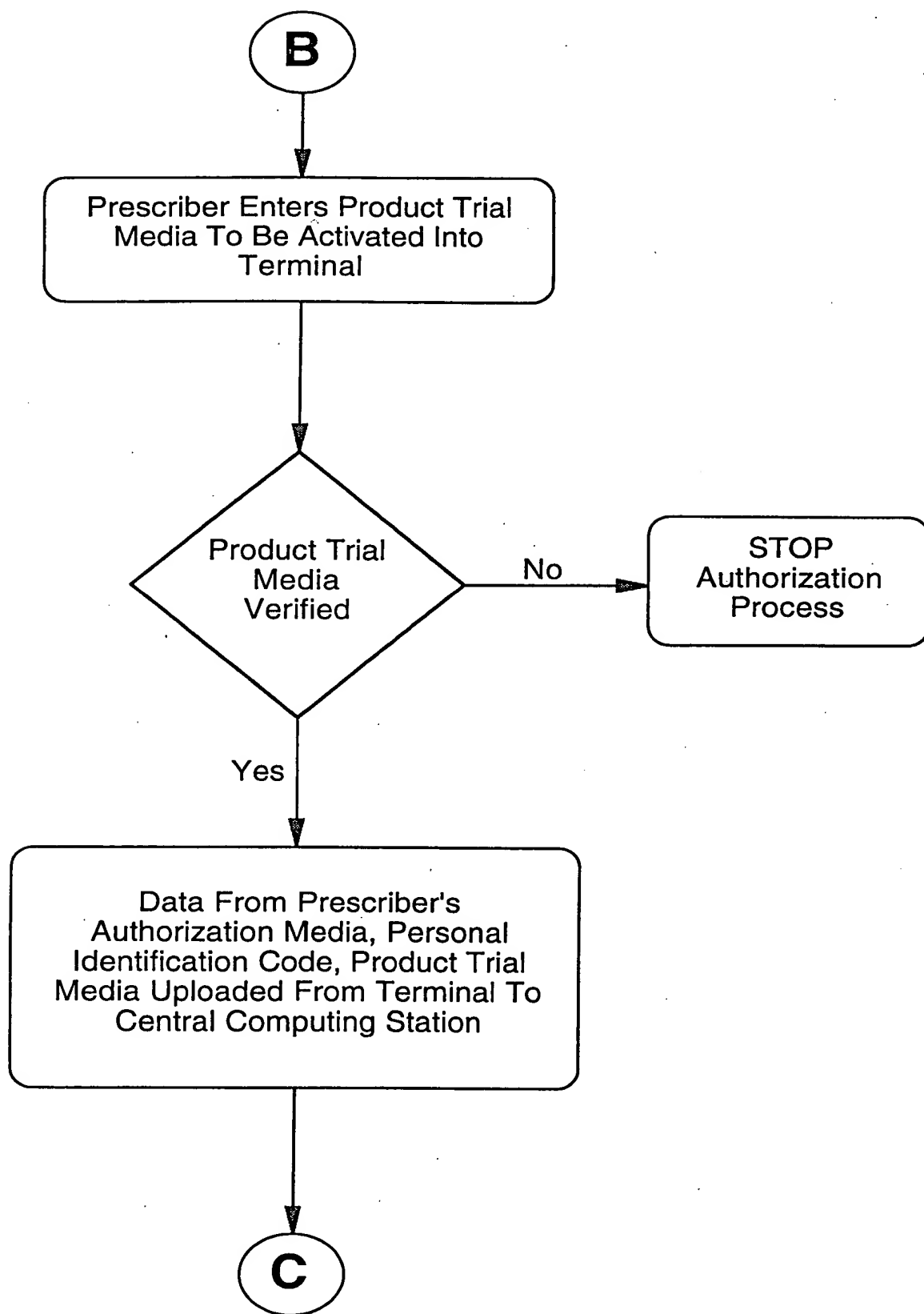


Figure 6B

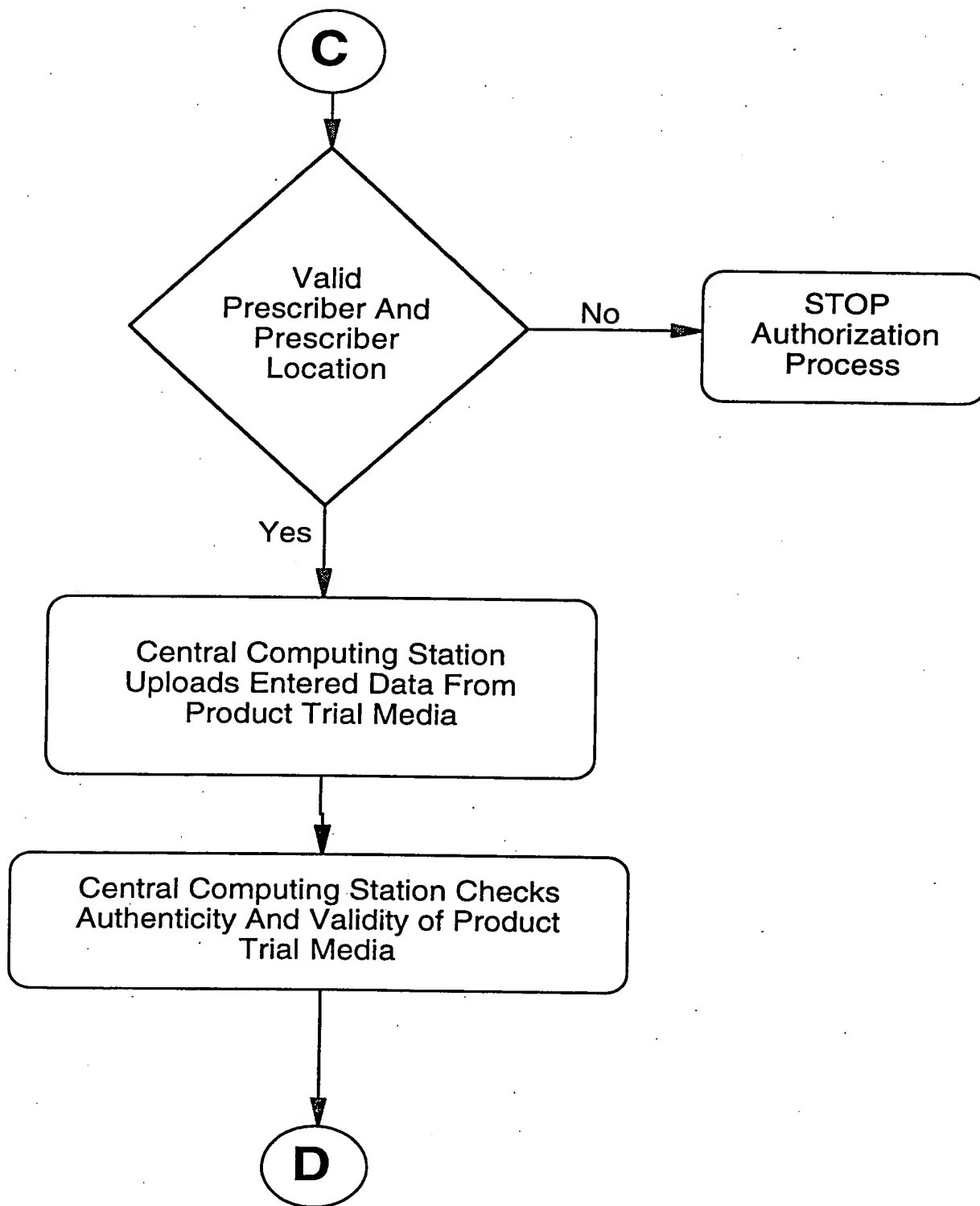


Figure 6C

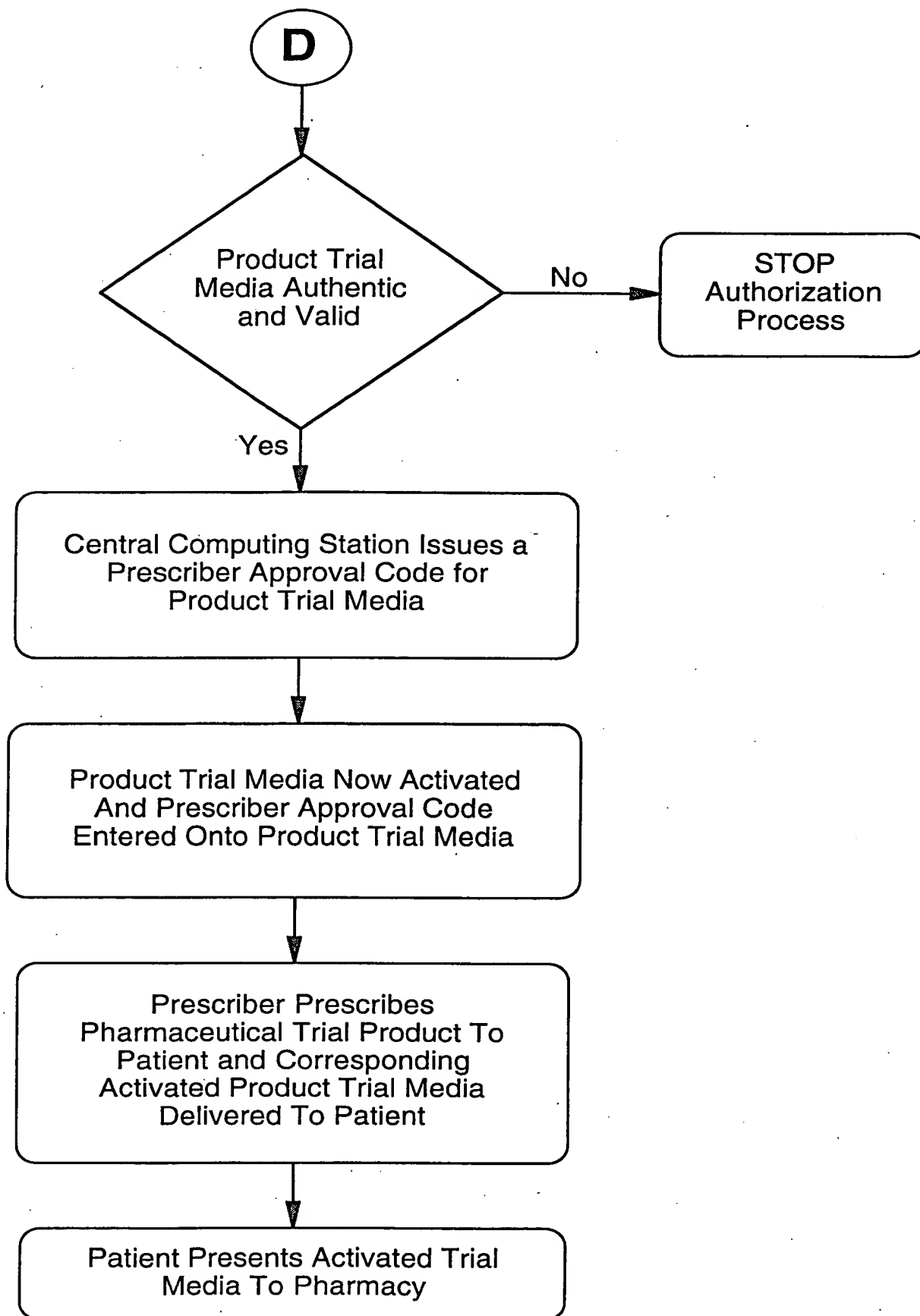
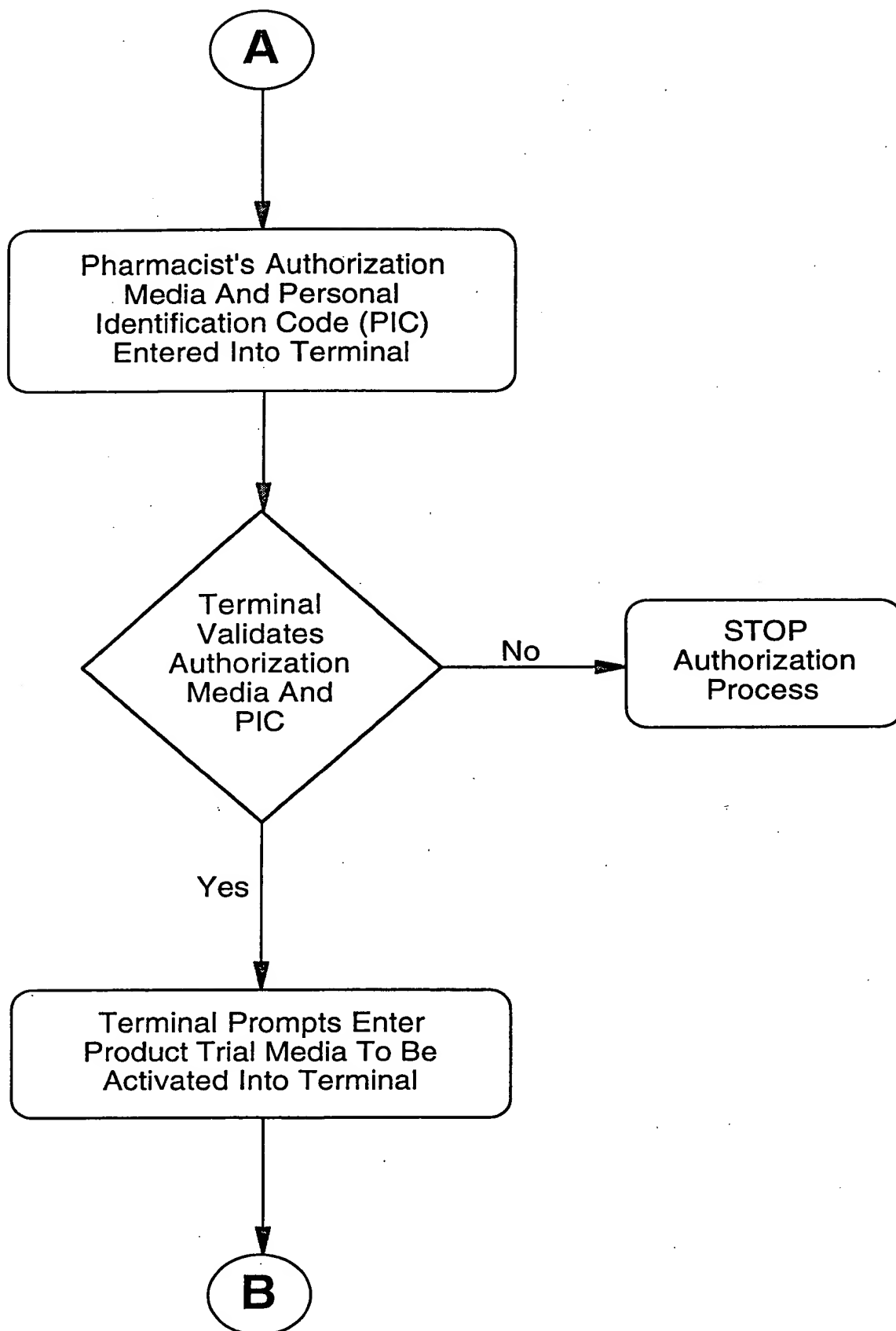


Figure 6D

005240" 0285560



Figur 7A

005240" 09225560

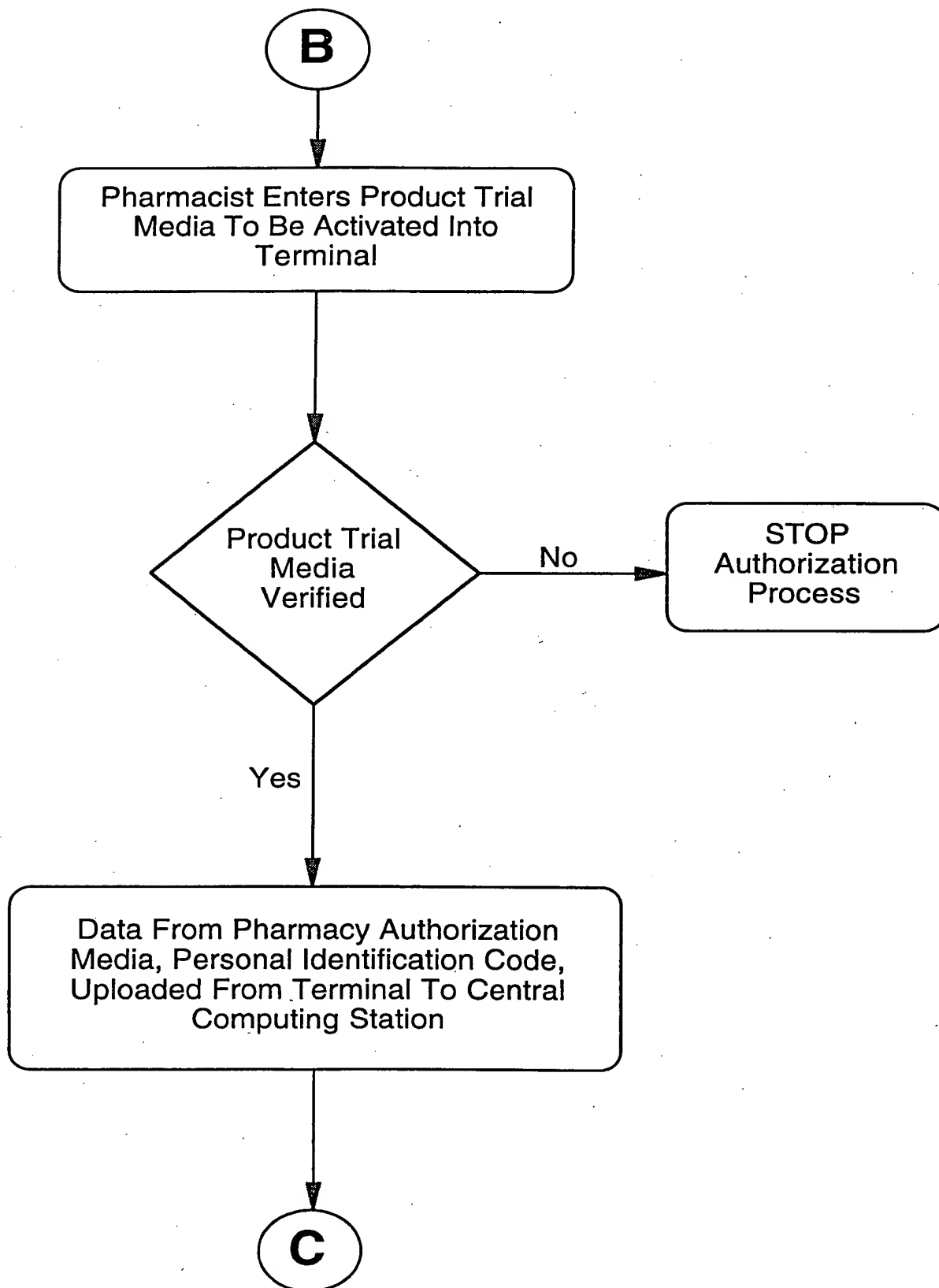


Figure 7B

005240 0928560

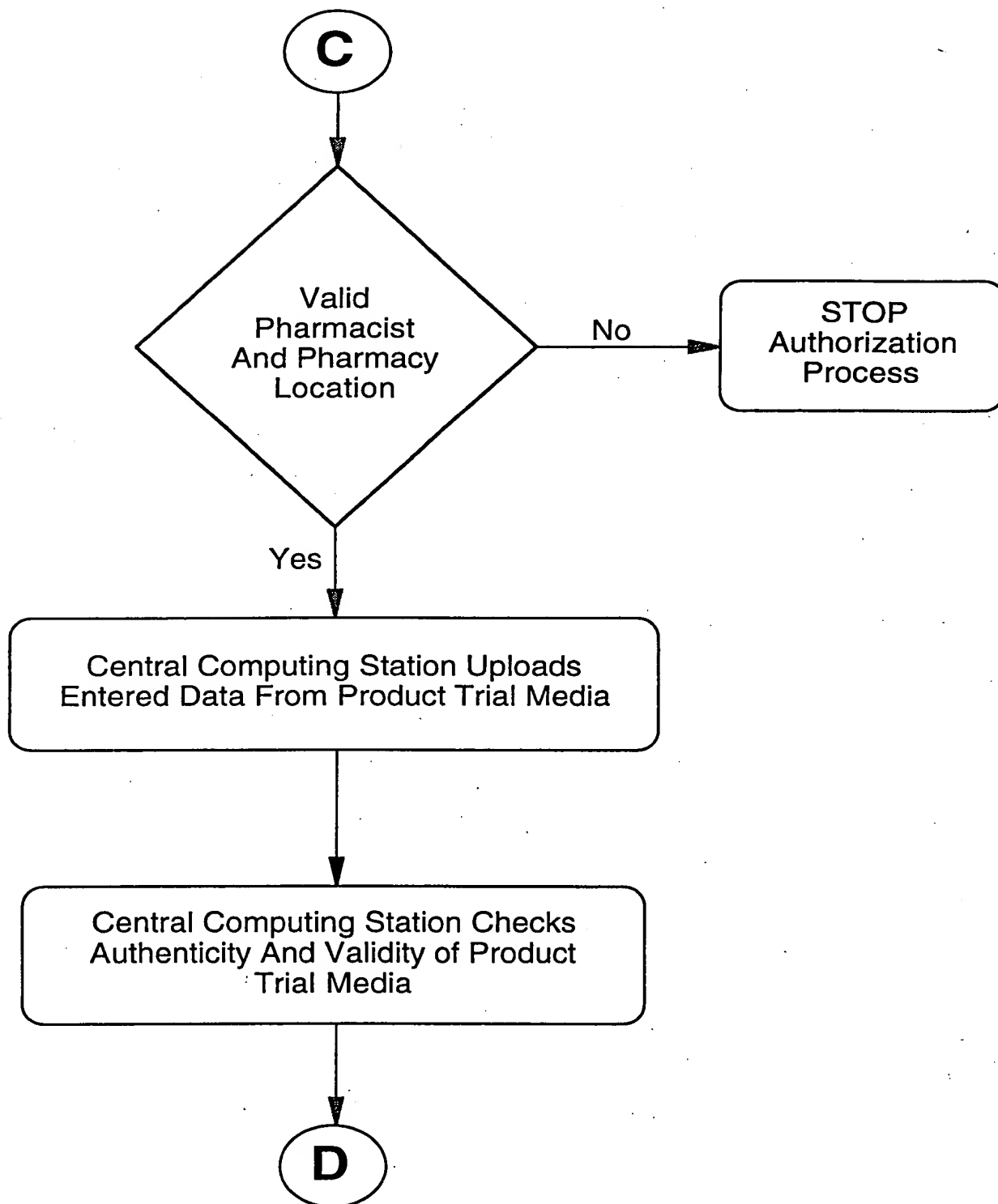


Figure 7C

005240"09285560

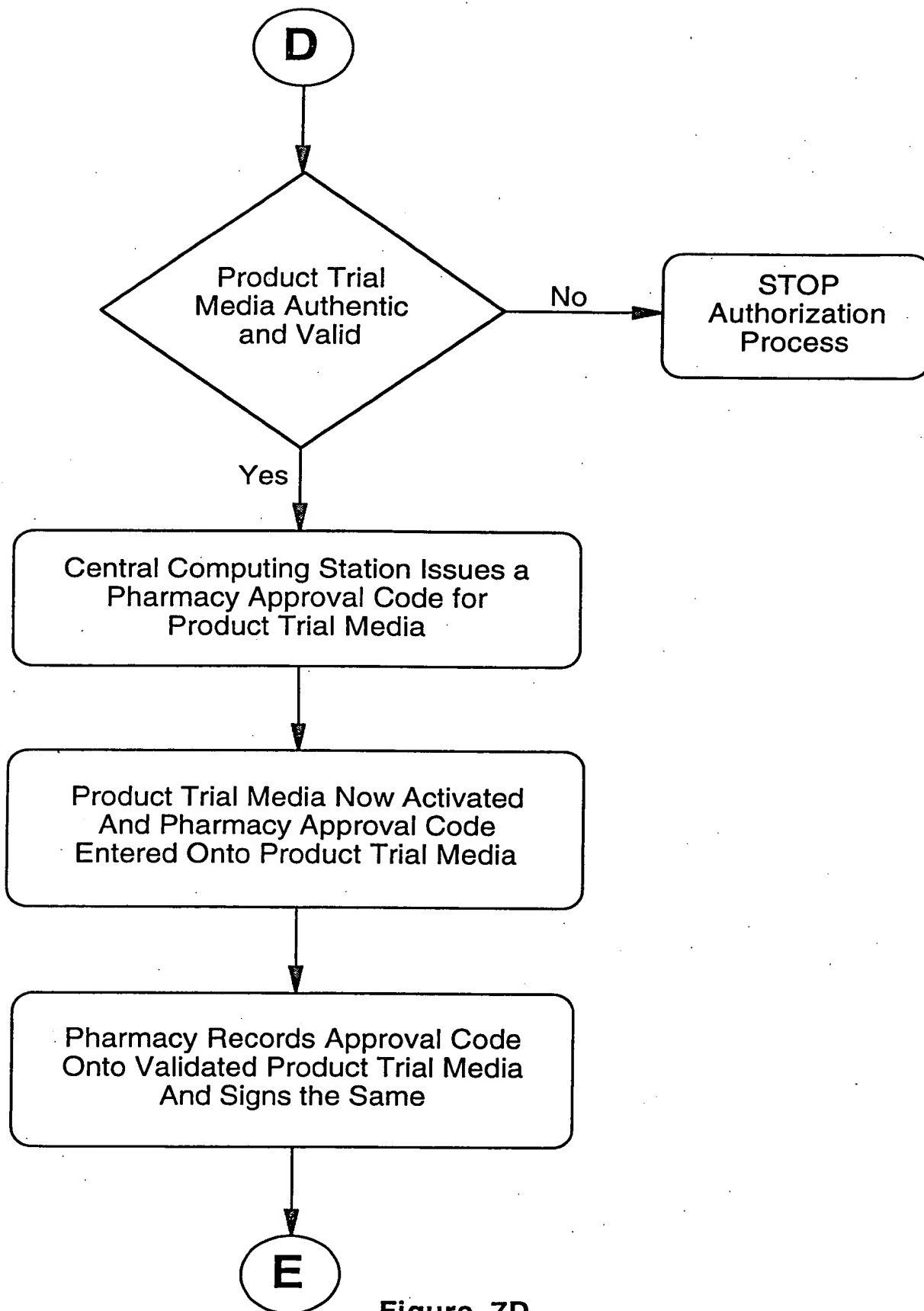


Figure 7D

005240-0628560

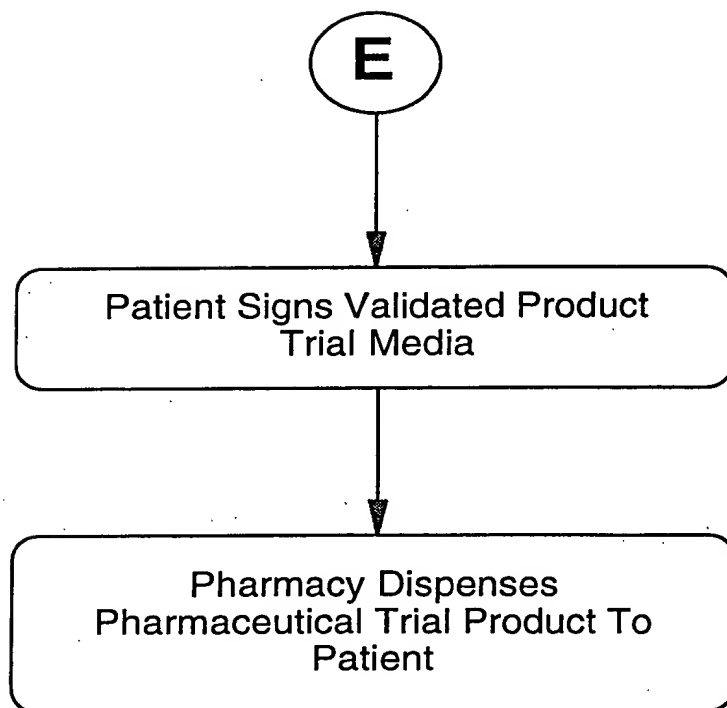


Figure 7E